

Local Investment Programme

Solihull Metropolitan Borough Council - **Solihull AMP and BIA** **Agile Working Project**

CASE STUDY

April 2018

Local Investment Programme

Local Investment Programme is overseen by the Local Government Association on behalf of the funders NHS Digital

OPM Group and the Bayswater Institute were commissioned to evaluate the Local Investment Programme producing an interim evaluation report and case studies.

Solihull Metropolitan Borough Council was one of 19 local authorities to be funded in 2017/18 under the theme – **enabling care professionals to work from any base at any time**

The Local Investment Programme full interim evaluation can be found at www.local.gov.uk/scdip



Synopsis

Challenge & solution

The impact

Sustainability

Lessons learned

Project Summary: Providing mental health professionals with effective mobile technology to access real time information management

Outcomes: Enabling informed decisions using accurate clinical, social care and risk data with improved outcomes for service users

Projected Savings: Increasing productivity of mental health professionals (£47,100 per annum)

- Solihull Metropolitan Borough Council (SMBC) would like to improve outcomes for people requiring Adult Social Care intervention under the Mental Health Act 1983 and the Mental Capacity Act 2005.
- The project will provide Approved Mental Health Professionals (AMHPs) and Best Interests Assessors (BIAs) with Agile Information Technology to enable them to carry out their statutory duties in the most appropriate location, and in the least restrictive and most effective way for the person and other relevant parties.
- Each AMHP or BIA will have a mobile device with live access to the relevant Information Management Systems, either SMBC only or SMBC and Birmingham and Solihull Mental Health Foundation Trust (BSMHFT) systems.
- This will enable the complex decision making required of AMHPs and BIAs to be informed by accurate clinical, social care and risk information data. In turn, this is most likely to lead to an outcome that is in the person's best interests and also minimises the risk of errors which might otherwise lead to legal action.
- The project will align with Solihull's 'Council Plan' in Delivering Value and Improving Health and Wellbeing for service users and other residents, as well as the STP.
- The project is also in keeping with Phase 3 of Solihull's Advancing Adult Social Care, with its emphasis upon new ways of working to improve outcomes for service users, carers and workers.
- It meets the council's commitment to the One Device policy and to agile working, enabling workers to 'stay connected' at any base, at any time.

The Challenge

- To date, other than the introduction of mobile phones, assessments under the Mental Health Act and Mental Capacity Act have largely been carried out in the same way for years i.e. reading the clinical records on a desktop computer, printing out basic details, recording information with pen and paper at the assessment, hand writing a report for the hospital if an admission takes place and then repeating the same information when completing the report onto the Social Care Information System on return to base.
- It has not yet been possible for Approved Mental Health Professionals or BIA's in Solihull to access to real time relevant digital information from any location, regardless of whether the person is at home, a public place, a health care setting or a police custody suite

The Solution

- The funding will be used to purchase 22 laptops to provide AMHPs and BIAs access to an efficient tool to support their practice.
- Connection will be via 4G access, ensuring quick and full connectivity whenever and wherever the worker requires this for their work. These will include improved access to the evidence needed for decision making within assessments; more efficient working processes and secure sharing of information, ensuring that the Local Authority meets its statutory obligations under the Data Protection Act 1998.

- AMHPs and BIAs will more readily capture complex information, which emerges in a non-linear way from various sources and often in a crisis situation. The immediacy of inputting data onto the live system is expected to improve accuracy.
- The use of the BSMHFT and SMBC live systems will assist in enabling the practitioner to access the person's social, medical and risk history.
- AMHPs and BIAs will be enabled to make evidence based decisions that are appropriate for the service user and minimise future risks of SMBC facing a legal challenge.
- The use of live remote working will maximise the time of AMHPs and BIAs, who are in high demand and short supply e.g. a BIA will be able to undertake multiple DOLS assessments in a Care Home without the need to return to base to input or to seek other relevant data.
- Equally, an AMHP who faces a wait of several hours for an ambulance to convey a detained patient will be able to use the time to produce the required AMHP Report.
- Flexible working will enable working outside of office hours for those who choose this.

Cost Savings

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- AMHPs and BIAs will be enabled to make evidence based decisions that are appropriate for the service user and minimise future risks of SMBC facing a legal challenge.
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- On-going connectivity costs and maintenance will be provided by the Council and the laptops would be incorporated into the replacement programme that has now been agreed to ensure that equipment remains up-to-date and fit for use.
- In addition, SMBC is currently in the process of going out to tender for a replacement Social Care System to be used across the authority – this project of supplying 4G laptops to AMHPs and BIAs will complement that by enabling true mobility of staff with real-time data and the ability to download and submit forms whilst away from the office base by making full and effective use of a modern and advanced Social Care system for Adult Social Care professionals.

Lessons learned:

- AMHPs have already expressed significant benefits such as: Ability to seek immediate and urgent information from Carefirst database when referral is made and the AMHP is out of the office. This is particularly important in risk assessment and management and supports protection for all parties.
- AMHPs are saving time, ranging anything from 1 – 6 hours due to being able to start or complete their AMHP Assessment Report whilst awaiting an ambulance or admission.
- Mileage being reduced due to not having to return to the office.
- There has been an improvement in data quality as no forms are being completed by hand.

Anticipated lessons

- Data to be collected to calculate averages reduced over next 3 months.

Challenges to delivery:

- Technical issues surrounding 4G.

Learnings to date:

- Great initial results with only 24 laptops.
- Very positive feedback from the practitioners.
- Approach appears sustainable as IT will pick up future costs.



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The final evaluation report will be published by March 2019

